

**OFFICE OF THE INSPECTOR GENERAL
for the
Department of Mental Health, Mental Retardation
And Substance Abuse Services**

**SNAPSHOT INSPECTION
NORTHERN VIRGINIA TRAINING CENTER**

**James W. Stewart, III
Inspector General**

OIG REPORT # 95-04

Facility: Northern Virginia Training Center
Fairfax, Virginia

Date: March 3-4, 2004

Type of Inspection: Snapshot Inspection / Unannounced

Reviewers: Cathy Hill, LPC

INSPECTION SUMMARY

A Snapshot Inspection was conducted at Northern Virginia Training Center in Fairfax, Virginia on March 3-4, 2004. The purpose of a snapshot inspection is to conduct an unannounced review of a facility with a primary focus on three basic areas. The areas are as follows: the general conditions of the facility, staffing patterns and activity of patients.

NVTC is one of five training centers dedicated to providing residential and active treatment services to persons with mental retardation. This approximately 200-bed facility primarily serves individuals from the Northern Virginia area.

NVTC maintains a staff to client ratio that provides for the training, care and safety needs of the residents it serves. The facility has initiated a number of training opportunities designed to enhance the retention of staff including involvement in an ESL (English as a Second Language) in the Workplace Program. A newly operational supervisory workgroup has been established for identifying and addressing workforce issues.

Residents at NVTC are provided with opportunities to participate in active treatment programming in a variety of settings depending upon their level of functioning.

Tours of the residential areas and the campus throughout the inspection revealed that overall the facility was clean, comfortable and well maintained.

<p>STAFFING PATTERNS</p> <p>1. Number of staff scheduled for this shift for this unit?</p> <p>DSA= Direct Service Assistant Med Aide= medication assistant</p>	<p>Evening shift – March 3rd</p> <p>Unit 7 4 DSAs 1 Med Aide</p> <p>Unit 7C 5 DSAs 1 Med Aide</p> <p>Unit 8A 4 DSAs 1 Med Aide</p> <p>Unit 8C 4 DSAs 1 Med Aide</p> <p>Unit 1 4 DSAs 2 Med Aides</p> <p>Day Shift – March 4th</p> <p>Unit 6 8 DSAs 1 Med Aide</p> <p>One staff member was doing 1:1, 2 were escorting residents to the skills training program or to appointments</p> <p>Unit 5A 6 DSAs</p> <p>Unit 5C 5 DSAs</p> <p>Unit 3A 5 DSAs</p> <p>Unit 3C 5 DSAs 1 Med Aide</p> <p>Unit 3D 5 DSAs</p>
<p>2. Number of staff present on the unit?</p>	<p>Observations and interviews revealed that staff presence was as noted above. During the day shift, several staff members were off the units transporting residents to programming or appointments.</p>
<p>3. Number of staff doing overtime during this shift or scheduled to be held over?</p>	<p>Interviews with staff and staffing counts indicated that 1 staff member, during the day shift on March 4th, was working overtime. Interviews indicated that the facility has staggered scheduling in order to maximize staff availability during hours when direct client care is greatest.</p>

4. Number of staff not present due absence because of worker's compensation injury/disability?	Interviews with Staff indicated that 15 staff members were out on short-term disability, 5 were out on long term disability and 2 were out on long term disability/Worker's Compensation status. Of the 22 positions effected, 17 were direct care positions.
5. Number of staff members responsible for one-to-one coverage during this shift?	Interviews with staff indicated that 1 staff member was responsible for 1:1 on the units. There were five individuals that required 1:1 supervision when off the unit.

6. Are there other staff members present on the unit? If so, please list by positions.

During the day shift, unit staff reported that RNs routinely make rounds on each unit. It was also reported that physical therapists, social workers and psychologists frequent the units. The presence of unit supervisors was also noted.

Additional comments regarding staff: Interviews were conducted with staff both in a formalized interview process and while touring the units. All staff indicated that it was the helping relationship that they were able to establish with the residents that made their work experience rewarding. Direct care staff indicated that management provided a mechanism for them to offer ideas regarding scheduling and activities within their respective units. A supervisory workgroup designed to identify, dialogue and address workforce issues was holding its first meeting on the day of the inspection. One of the goals in establishing this workgroup is to build a supervisory core for sharing information, ideas, solutions and support.

Of the 16 interviewed, 12 staff expressed concern regarding several aspects of the facility wide on-call system established to assure coverage. A staff member is scheduled for being on-call during a scheduled day off. The person is required to call their unit one hour prior to the beginning of the shift to determine whether they are needed for coverage. On-call is required on a rotating basis. Those interviewed indicated that supervisory staff have informed them that they had to flex the schedule during the pay period in order to compensate for the hours worked as a result of being called-in, instead of scheduling the person for an additional day off. It was explained that this practice was less than satisfactory because having a few hours off several days in a row does not really compensate for having an entire day off. Interviews with two supervisory staff revealed that it was the practice to arrange flex-time off because it was very difficult to schedule in an additional day off. The supervisors also indicated that the facility did not have to pay overtime if schedules were flexed, which had the added benefit of being a cost savings measure.

As noted during previous inspections, NVTC has both the benefit and challenge of having a number of individuals from various countries serve on the staff. The task of assuring that personnel are adequately trained and effectively understand the materials needed for providing the care required for persons with severe and profound mental retardation is one responsibility of the staff training office. Several programs have been offered facility wide to enhance the skills of these valuable staff members. The facility is developing an ESL (English as a Second Language) in the Workplace program in cooperation with the Fairfax County Adult Education Program. At the time of the inspection, there were ten members among the residential, foodservice and housekeeping staff interested in participating.

NVTC is one of two facilities that will participate in the College of Direct Support Program. The 11-course curriculum is designed to enhance staff knowledge and skills. Among the courses are the following topics: positive approaches to challenging behaviors, rights and choices, community inclusion,

documentation and record keeping, and direct support professionalism. Staff involved in the pilot program will serve as mentors to other staff on their respective units following the successful completion of this web-based course.

The Center has implemented TOVA training for members of the administrative, program, and clinical staff. The training has been incorporated in the pre-service training and orientation for new staff since October 2003. Staff hired prior October 2003 are scheduled to cycle through this updated training during their annual re-certification.

OIG Finding 1.1: NVTC maintains a staff to client ratio that provides for the training, care and safety needs of the residents it serves.

OIG Recommendation: None.

OIG Finding 1.2: The facility is currently providing a mechanism for identifying and addressing staff concerns regarding scheduling and the use of flextime through the establishment of a workgroup of supervisory staff.

OIG Recommendation: As this workgroup was newly established, the OIG does not have any recommendation at this time.

PART II: ACTIVITIES OF THE PATIENTS/RESIDENTS

1. Bed capacity for the unit:

Unit 1 - 16
Unit 3A - 20
Unit 3C - 20
Unit 3D - 16
Unit 5A - 16
Unit 5C - 16
Unit 6A&C - 16
Unit 7A - 20
Unit 7C - 17
Unit 8A - 20
Unit 8C - 20

2. Census at the time of the review:

Unit 1 - 15
Unit 3A - 19
Unit 3C - 19
Unit 3D - 16
Unit 5A - 16
Unit 5C - 16
Unit 6A&C - 15
Unit 7A - 19
Unit 7C - 15
Unit 8A - 19
Unit 8C - 17

The census on the date of the review was 186.

3. Number of patients/residents on special hospitalization status

Interviews with staff indicated that no patients were on special hospitalization status.

4. Number of patients/residents on special precautions?

Interviews with staff indicated that due to the complexity of clients, most are informally on a special precaution for medical or behavioral issues.

5. Number of patients/residents on 1 to 1?

Interviews with staff indicated that 5 patients are on 1:1 when off their unit. There was one person on 1:1 in Unit 6.

6. Identify the activities of the patients/residents. Residents at NVTC are provided with a number of activities both on and off campus. Staff in at least three units discussed plans for taking some residents to the beach this summer. Outings into the community to the mall, parks, ballgames and other recreational events occur routinely. During the day, residents either work off grounds, go to the Skills Training Center (STC), or the Developmental Day Program (DDP).

7. What scheduled activities are available for patients/residents during this shift?

Eighty-six residents at the facility were identified as actively engaged in off-site programming. Those that are involved in active programming on campus included 49 persons receiving unit based programming, 29 persons in the Skills Training Center (STC), 21 persons in the Developmental Day Program (DDP) and 1 resident was noted as officially in retirement.

In the Skills Training Center, residents have opportunities to engage in a variety a work related activities to which they are assigned and for which they receive fair market value compensation. The activities have included: can-crushing, bulk mail stuffing, silverware rolling, managing the vending machines on campus, and facility ground maintenance. Assignment is based on each person's level of functioning and is consistent with goals established in the treatment plan. The DDP is designed for residents that are not ready for the STC or for participating in community-based programs. Some activities that are offered in the DDP program are paper shredding and cardboard recycling.

8. Are smoke breaks posted?

Interviews with staff revealed that none of the clients at the facility smoke.

9. Do patients/residents have opportunities for off-ground activities?

All clients have the opportunity for off grounds activities, either through work projects or fieldtrips. Fieldtrips include going to the park, airport, mall, zoo, restaurants, local basketball games, movies, bowling, miniature golf, musical events and overnight trips.

10. As appropriate, do patients/residents have opportunities for snacks?

Interviews with staff indicated that snacks are offered as appropriate, according to a resident's diet.

11. Other comments regarding patient activities:

Interviews and observation revealed that for residents that are unable to be a part of an off grounds work program, STC or DDP, staff work with them on the units or they attend physical therapy at the Gym, the Pool, or the Sensory Stimulation Room.

OIG Finding 2.1: Residents at NVTC are provided with opportunities to participate in active treatment programming in a variety of settings depending upon their level of functioning. They are provided with multiple opportunities for participating in outings into the community.

OIG Recommendation: None.

PART III: ENVIRONMENTAL ISSUES

AREA OF REVIEW: Common Areas	Comments and Observations
1. The common areas are clean and well maintained.	Tours of all the living units indicated that the common areas on the units were clean and well maintained. Efforts to make the units comfortable and home-like were noted.
2. Furniture is adequate to meet the needs and number of patients/residents.	Observations during tours of all units indicated that the furniture was adequate in number and design to meet the needs of the clients. Residents at the facility require a number of pieces of adaptive equipment, which is designed to meet treatment associated with physical management.
3. Furniture is maintained and free from tears.	Observations made during the tours indicated that the majority of furniture was well maintained.
4. Curtains are provided when privacy is an issue.	Observations indicated that curtains were provided for privacy.
5. Clocks are available and time is accurate.	Observations during tours indicated that all clocks were set to the accurate time of day.
6. Notifications regarding ways of contacting the human rights advocate are posted.	Observations during tours revealed that a poster indicating the human rights advocate's name and phone number was hanging in the entrance of each building.
7. There is evidence that the facility is working towards creating a more home-like setting.	Tours and observations confirmed that the staff is working hard to create a more homelike setting in all living areas of each unit.
8. Temperatures are seasonally appropriate.	Tours and observations confirmed that the temperature was set to be seasonally appropriate and the residents appeared to be comfortable.

9. Areas are designated for visits with family, etc., which affords privacy. Visiting hours are clearly posted.	Tours revealed that each building had an area for families to visit. Visiting hours are posted.
10. Patients/residents have access to telephones, writing materials and literature.	Interviews with staff revealed that patients have access, at any time to telephones, writing materials and literature.
11. Hallways and doors are not blocked or cluttered.	Tours confirmed that hallways and doors are not cluttered or blocked.
12. Egress routes are clearly marked.	Tours confirmed that egress routes are clearly marked and not blocked.
13. Patients/residents are aware of what procedures to follow in the event of a fire.	Interviews with staff indicated that residents understand the procedure to follow in the event of a fire, except for those whose capacity to understand precludes them from being considered effectively informed.

Bedrooms	Comments and Observations
1. Bedrooms are clean, comfortable and well maintained.	Tours and observations of all living units indicated that bedrooms are clean, comfortable and well maintained.
2. Bedrooms are furnished with a mattress, sheets, blankets and pillow.	Tours and observations confirmed that bedrooms are furnished with a mattress, sheets, pillow and a blanket. The facility is currently testing several bed models to determine which might provide the necessary protections for the residents without unduly restricting freedom of movement.

3. Curtains or other coverings are provided for privacy.	Observations during tours indicated that curtains were provided for privacy.
4. Bedrooms are free of hazards such as dangling blind cords, etc.	Observations revealed that vertical blinds were not used at the facility; therefore there were not cords to be a hazard. Other cords such as those associated with electronics were secured so as to not present a hazard.
5. Patients/residents are able to obtain extra covers.	There is a linen closet on each unit in which extra pillows and blankets can be secured.
6. Patients/residents are afforded opportunities to personalize their rooms.	Tours and interviews indicated that residents were given the opportunity to personalize their own rooms. Some examples of personalized items were: family pictures, posters, dolls, and stuffed animals.
Seclusion Rooms	Comments and Observations
1. Seclusion and/or time out rooms are clean.	On the units, where time out rooms are utilized, they were noted to be clean.
2. Seclusion and/or time out rooms allow for constant observations.	Time-out rooms were all designed for constant observation.
3. Bathrooms are located close to the seclusion or time-out areas.	Tours of the units indicated that none of the units are designed to have the bathroom located near the time out room.
Bathrooms	Comments and Observations
1. Bathrooms were clean and well maintained	All the bathrooms toured were clean and well maintained.
2. Bathrooms were noted to be odor free.	All bathrooms toured were odor free.
3. Bathrooms were free of hazardous conditions.	Tours of all bathrooms indicated that all bathrooms were free of hazardous material.

Buildings and Grounds	Comments and Observations
1. Pathways are well lit and free of hazardous conditions.	Tours of all residential units indicated that all pathways were well lit and free of hazardous conditions.
2. Buildings are identified and visitor procedures for entry posted.	Tours and observations verified that NVTC has worked hard to post signs to indicate procedures for visitors entering the building. Staff routinely asked the reviewer for proper identification.
3. Grounds are maintained.	Tours and observations of the grounds indicated that NVTC works to create an attractive outdoor environment. The nature trail was closed at this time because of damage associated with severe weather. The facility is in the initial stages of clearing out the debris. Plans are to add exercise stations along the restored trail.
4. There are designated smoking areas with times posted.	OIG staff were informed that as there are not any residents that currently smoke this is not an issue. In the past, there was no specific time allocated for smoking and as the need arises it would be handled on an individual basis.
5. Patients/residents have opportunities to be outside.	Interviews with staff indicated that patients are outside often, either for leisure or activities, especially when the weather is pleasant.

OIG Finding 3.1: Overall, the facility was clean, comfortable and well maintained. There was evidence that the facility had worked to make this institutional setting appear more home-like.

OIG Recommendation: None.

